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| IDS Form PTO/SB/08: Substitute for form 1449A/PTO | | | | Complete if Known | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i> | | | | <i>Application Number</i> | 10/825,154 |
| | | | | <i>Filing Date</i> | April 16, 2004 |
| | | | | <i>First Named Inventor</i> | Anne SABBAGH. |
| | | | | <i>Art Unit</i> | 1619 |
| | | | | <i>Examiner Name</i> | FOLEY, Shanon A. |
| Sheet | 1 | of | 1 | <i>Attorney Docket Number</i> | 06028.0046-00000 |

| U.S. PATENTS AND PUBLISHED U.S. PATENT APPLICATIONS | | | | | |
|---|-------------|------------------------------------|--|--|---|
| Examiner Initials | Cite No. | Document Number | Issue or Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
| | | Number-Kind Code <i>(if known)</i> | | | |
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| FOREIGN PATENT DOCUMENTS | | | | | | |
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| Examiner Initials | Cite No. | Foreign Patent Document | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear | Translation |
| | | Country Code Number Kind Code <i>(if known)</i> | | | | |
| | 1 | DE 197 25 004 | 12-24-1998 | Goldwell GmbH | | Abstract |
| | 2 | JP 9-132515 | 05-20-1997 | Maekawa Seiji | | Machine Translation |
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| NON PATENT LITERATURE DOCUMENTS | | | |
|---------------------------------|-------------|---|-------------|
| Examiner Initials | Cite No. | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | Translation |

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|--|---|---|--|
| | 3 | English Abstract for DE 197 25 004, dated 12-24-1998. | |
| | 4 | Machine Translation of JP 9-132515, dated 5-20-1997. | |
| | 5 | Notice of Opposition dated March 6, 2008 for European Patent No. 1 468 667 (priority application to the present application). | |
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|-----------------------|--|--------------------|--|
| Examiner Signature | | Date Considered | |
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